

EVENT PERMIT



Ordinance 14-15

WORLDS RICHEST TARPON TOURNAME

PERMIT NUMBER:

TMP2016-00144

Date(s) of Event:

May 20, 2016 thru May 21, 2016 from 11:00am until 10:00pm

Property Owner:

COUNTY ROW

Applicant:

BOCA GRANDE CHAMBER OF COMMER

Contact: NAT ITALIANO

Description:

WORLDS RICHEST TARPON TOURNAMENT FESTIVAL/ Art Show, Music, Food,

& Beverages

Location of event:

ROW PARK AVE/4TH ST BOCA GRANDE 33921

ROW PARK AVE BETWEEN 5TH ST & 3RD ST, DOWNTOWN BOCA GRANDE

***941-964-0568

Will the event be attended by 1000 or more people?

No

Will the event be held on County Owned Property?

Yes

Will there be alcohol consumed or sold at the event?

Yes

Will a bond be posted for this event?

No

Permit Conditions:

- * Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- * The premises is to be left in the same condition as it was prior to the event.
- * The permit is to be readily available for inspection during the entire event.
- * If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners

Lee County, Florida

County Manager

Date



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

WORLDS RICHEST TARPON TOURNAMENT - MAY 20TH & 21ST, 2016



COMMUNITY DEVELOPMENT



Event Application

	Check the	approp	oriate k	box(es) bel	ow:
--	-----------	--------	----------	--------	-------	-----

- F SPECIAL EVENT PERMIT
- ▼ USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

Section ! - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	WORLDS RICHEST TARPON TOURNAMENT FESTIVAL
Date(s) of Event / Production:	MAY 20TH & 21st, 2016
Location(s) of Event:	PARK AVE. BETWEEN 5TH & 3RD STREET, DOWN TOWN BOCA GRANDE - MAP ATTACHED
Name of Applicant:	NAT ITALIANO (COMMITTEE CHAIRMAN) BOCA GRANDE CHAMBER OF COMMERCE
Applicant Address:	NAT ITALIANO P.O. BOX 704 BOCA GRANDE, FL 33921
Applicant Phone Number:	941-964-0568 OR 964-0400
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	INFO@BOCAGRANDECHAMBER.COM & OR NAT@ITALIANOINSURANCE.COM
Estimated Attendance:	700 - 900
Event Description: Include each activity, when activities take place, etc.	SET UP 7AM FRIDAY ART SHOW 11am - 8pm FRIDAY & SATURDAY MUSIC 2pm - 10pm FRIDAY & SATURDAY FOOD & BEVERAGES 11am - 10pm FRIDAY & SATURDAY
Hours of Operation:	SEE ABOVE
STRAP # of Parcel:	14-43-20
Owner of Premises*:	LEE COUNTY GOVERNMENT / DOT

^{*}Notarized statement from the property owner specifically consenting to the proposed use required.



Fill out the following questions for allpermit types:

What is the Zoning Classification of the premises? DOT RIGHT OF WAY
Are any temporary structures to be installed for the event? Yes No Type:
Do you have the appropriate permits for the temporary structures?
* For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activities indentified, including all parking areas.
Insurance Company Insuring the Event: ITALIANO INSURANCE CO.
Note: Certificate of Insurance must be submitted at time of application
Surety Company Bonding this Event (Name and Address): N/A
Will Vehicles be Used as Part of This Event? Will Food be Available at this Event? Will Alcoholic Beverages be served/consumed at this Event?
「Yes 反 No 反 Yes 「 No
If yes, automobile coverage must be If yes, products liability coverage must be Included on the certificate of insurance. Included on the certificate of insurance. Included on the certificate of insurance. Included on the certificate of insurance.
Name & Address of Organization Providing Food: VARIOUS ISLAND RESTAURANTS
Type of Food being Served: VARIED MENU - FAIR STANDARD
Section II - USE OF COUNTY PROPERTY PERMIT
Organization Sponsoring the Event: BOCA GRANDE AREA CHAMBER OF COMMERCE
Fill out this portion for applications for Solicitation in the County Rights-of-Way:
Name of Charity: BOCA GRANDE AREA CHAMBER OF COMMERCE
Address of Charity: 480 EAST RAILROAD AVE, BOCA GRANDE, FL 33921
Phone Number: 941-964-0568
Non-profit certificate/registration number: 59-2402749
(Proof of registration with the Dept. of Agriculture & Consumer Services §496.405 or proof the organization is exempt from this requirement. §316.2045)
Section III - SALE/CONSUMPTION OF ALCHOLIC BEVERAGES PERMIT
Is alcohol being sold/consumed on County Property? If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell alcohol on County Property.
Non-profit certificate/registration number: 59-2402749 (Required if alcohol is to be <u>SQLD</u> at the event)
Please note: A permit from the State of Florida Division of Alcoholic Beverages and Tobacco may also be required; please call (239) 344-0885 for further details



e of Production (choose all the	at apply):					
TV Movie or Special	TV Series / Pilot	Г. Т	V Commercia	ı J	Still Photo	os
Public Service Announcement	Industrial / Documentar	уГ	Other:	······		
II any of the following be need	ed or included*?					
Street Closure			Yes	No No	•	
Traffic / Crowd Cor	ntrol		Yes	┌ No		
Fire or Burning			Yes	Mo		
Explosives or Pyrot	echnics		Yes	Mo		
Animals, Large or S	imall		Yes	No.		
Construction of An	y Kind	:	Yes	No.		
Large and/or Nume	erous Vehicles		T Yes	Γ. No		
Helicopters, Boats,	etc.	:	Yes	∏ No	•	
Stunts	•	,	Yes	∏ No		
Other		•	Yes	┌ No		
For any marked Yes, provide f	further details below:			74		
	further details below:					
	further details below:					
	further details below:					
Special Parking Requirements:						
Special Parking Requirements:		cilities, etc)			
Special Parking Requirements:		cilities, etc)			
Special Parking Requirements:		cilities, etc.)			
Special Parking Requirements: City or County Services Require	ed: (Personnel, equipment, fac			rida to t	rack the e	conomic im
Special Parking Requirements: City or County Services Require The following information is re	ed: (Personnel, equipment, fac	rds on pro	duction in Flo	rida to t	rack the ed	conomic im
Special Parking Requirements: City or County Services Require The following information is re	ed: (Personnel, equipment, fac	rds on prod te as close	duction in Flo y as possible	rida to t		conomic im
Special Parking Requirements: City or County Services Require The following information is rethe industry. If exact figures at Number in Cast: Total budget:	ed: (Personnel, equipment, fac quired for local and state reco re not available, please estimat	rds on pro te as close	duction in Flo y as possible Numbe	•		conomic im

Applicant Agreement - Signature Required



SECTION I - SAFETY

The Applicant agrees to provide adequate traffic and crowd control, emergency medical services and any other items, at the Applicant's expense, required by Lee County to protect the health, safety and welfare of the public. Lee County shall have the power to review the proposal and require, as necessary, detailed plans, diagrams, and explanations to clearly outline to Lee County, exactly what the Applicant is proposing.

SECTION II - INSURANCE

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application, liability insurance in the amounts determined by Lee County Risk Management to protect against damages or other claims arising from use of County property by the applicant or its guests. Other limits may also be established by Lee County Risk Management for events which will be serving or consuming alcoholic beverages at approved County property. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. "Lee County Board of County Commissioners" must be named as "additional insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property. The Insurance may not be canceled during the term of the event, if this occurs, the County has the right to revoke approvals related to use of the County property for the event, without recourse by the applicant.

SECTION III - INDEMNIFICATION

The Applicant agrees to indemnify, release and save harmless Lee County against any and all claims, costs, demands, damages, judgments or injuries of any nature arising from the conduct or management of, or from any work or thing whatsoever done in or about said Lee County property or any building or structure appurtenant thereto or equipment thereof during the term of this Permit, or arising during such term from any act of negligence of the Applicant, Applicant's agents, contractors, or employees, or arising from any accident, injury, or damage whatsoever, however caused, to any person or persons, or to any property of any person, persons, corporation or corporations, occurring during the term of this agreement on, in, or about said Lee County property, and from and against all costs, attorney's fees, expenses and liabilities occurring in connection with any such claim or any action or proceeding brought thereon.

For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the permittee, and resulting or occurring from any negligent act, omission or error of permittee, resulting in or relating to injuries to body, life, limb or property sustained in, about or upon the permitted permises or improvement thereto, or arising from the use of the premises.

SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.

Applicant Agreement - Signature Required



SECTION V - AGREEMENT

The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee County's cancellation or termination of said permit.

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.

Signature of Applicant

Print Name of Applicant and Title

2/22/16

Witness

Print Name of Witness

Date



LEE COUNTY SHERIFF'S DEPARTMENT 14750 SIX MILE CYPRESS PARKWAY FORT MYERS,FLORIDA33912 (239) 477-1199

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT

∪SE OF CO	UNTY PROPERTY	PERMIT	EACH ITIES
⋉ PERMIT TO		JME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY	FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, P LICANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS LY WITH FOR THEIR EVENT.	YOUR ORGANIZATION
Parking:	Parking in authorize	ed parking areas only.	
· ·			
Deputies (How Many?):	Friday, May 20th & deputy from 1600-	Saturday, May 21st -One (1) Deputy from 1400-2300hrs and 2300hrs.	an additional one (1)
Fee for Services:	Security rate - \$40/	hour per deputy/per day	
Special Arrangements:	No blocking or inte	rfering with right-of-way	
	Print Name:	Capt. Scott Lucia	
	Signature:	Capt. Scott Lucia Copally speedly Cast Scott Scott Scott Scott Scott Capt. Scott Scott Capt. Scott Scott Scott Scott Capt. Scott Sco	
	Title:	Special Events, Permits and Details	
	Date:	11 April 2016	



FIRE DEPARTMENT

The Fire Department serving the area where the event is to be held signs this form.

Please see User's Guide for contact information and Fire District Map.

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT

IX USE OF COUNTY PROPERTY PERMIT

FILM PERN	NIT		
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PI	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION Y WITH FOR THEIR EVENT.	1
Fire Guards (How Many?)		None	•
Fee for Services:		None	•
Flammable Vegetation:		None	1
First Ald Equipment:			,
į		None	
ire Extinguishing:	derefe dage in specific en les communitées (en le proposition de le propins de le propins de le propins de le p		
		None	
pecial Arrangements:	Leave fire depa require exting	artment "access" (firelane) on closed streets. Any outdoor cooking uishers and proper equipment and placement.	may
		In case of emergency - Dial 911	
	Print Name:	C.W. Blosser	
	Signature:	CAL	
	Title:	Fire Chief	
	Date:	03/31/2016	

Page 17



EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY 14752 SIX MILE CYPRESS PARKWAY FORT MYERS, FL 33912 (239) 533-3911

Check the appropri	ate box(es) belov	v:		
T SPECIAL EV	ENT PERMIT			
▼ USE OF CO	UNTY PROPERTY PE	ERMIT		
FILM PERM	IIT			
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLE ICANT TO COMPLY	ASE INDICATE BELOV WITH FOR THEIR EVE	V WHAT ARRANGEMENTS 'NT.	YOUR ORGANIZATION
Treatment Facilities:	None necessary.			
Medical Personnel:	None necessary.			
Medical Supplies / Equipment:	None necessary.			
Safety Requirements:	No additional precau	itions necessary.		
Fee for Services	Not applicable.			
Special Arrangements:	Please call 911 in the 239 533-3911.	event of an emergency.	To arrange special event coverag	e, contact our office at
	Print Name:	Benjamin Abes		_
	Signature:	Benjamin Abes	Gligitally ilgored by Renjamin Albas Olic condemplants Albas, on the County Public Safety, our Citylaton of Emergency Medical Services, ensafe level with subsequences, com. c=US Date: 2016-01-30 12:58:11 - 04:00*	
	Title:	Chief		-
	Date:	03/30/2016		



DEPARTMENT OF TRANSPORTATION 1500 MONROE STREET FORT MYERS,FL33901 (239) 533-8580

Check the appropri	ate box(es) bel	ow:		•
☐ SPECIAL EV	ENT PERMIT	• •		
•	UNTY PROPERTY	PERMIT		
			RAGES WITHIN LEE COUNT	Y FACILITIES
FILM PERM				
•				
AFTER REVIEWING THE WILL REQUIRE THE APP	APPLICATION, P LICANT TO COMP	LEASE INDICATE BELO LY WITH FOR THEIR EV	W WHAT ARRANGEMENT ENT.	S YOUR ORGANIZATION
Parking:	Park in designated	areas.		
Ingress and Egress:	Use all established	means of Ingress and egre	rss.	
				•
		••		
Special Arrangements:	are planned, all MC	IT must be in accordance y	ance with traffic control as need with FDOT Standard Index 600 S ent organizer to insure that pub stained.	series, and the MUTCD. All
	1			
	Print Name:	Bryan Miller		_
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2016.03.31 11:22:48 -04'00'	_
	Title:	Senior Project Manager		_
	Date:	March 31, 2016		_



LEE COUNTY PARKS AND RECREATION 3410 PALM BEACH BOULEVARD FORT MYERS,FLORIDA33916 (239) 533-7275

	eta havlas) hala			
Check the appropria		, vv .		
•	UNTY PROPERTY I	PERMIT		
区 PERMIT TO	SELL AND CONSU	ME ALCOHOLIC BEVE	RAGES WITHIN LEE COUNTY	FACILITIES
FILM PERM				
AFTER REVIEWING THE WILL REQUIRE THE APPI	APPLICATION, PL LICANT TO COMPI	EASE INDICATE BELC LY WITH FOR THEIR E	W WHAT ARRANGEMENTS VENT.	YOUR ORGANIZATION
illumination:	Any additional light	ing must be provided by	permit holder.	
Deutsiam Anadas				
Parking Areas:	Use all designated Community Park ar	parking areas in the down and Center	n town area and overflow parking	at the Boca Grande
Special Arrangements:	 Must provide insu If alcohol is being may also be require Follow all guideling 	rance with Lee County Bu sold, a permit from the st	with Joe Wier from P&R for placer DCC being additionally insured. Tate of Florida Division of Alcoholi By DOT. If cones or barricades are 19-0569	c Beverages and Tobacco
	1			
•	Print Name:	Alise Flanjack	Joe Wier	
	Signature:	Alise Flanjack	Digitarly depending Alice Pandack DECONATION Paginick and the County hada seed I William County Amails (1997) and 1997 (1997) and 1997 Date 2016 01.30 153445-0500	R Wier
	Title:	Deputy Director	Supervisor	_

3/30/16

Date:

3/30/16



LEE COUNTY RISK MANAGEMENT COUNTY ADMINISTRATION BUILDING - 4TH FLOOR 2115 SECOND STREET FORT MYERS, FLORIDA 33901 (239) 533-2221

Γ	SPECIAL EVENT PERMIT
	USE OF COUNTY PROPERTY PERMIT
X	PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
Г	FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Check the appropriate box(es) below:

Insurance Requirements: |Commercial general liability insurance with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to applicants use of aforementioned event within Lee County.

> in addition, Host Liquor Liability insurance will be required with minimum limits of One Million Dollars (\$1,000,000) per occurrence. Should Host Liquor Liability coverage be afford under the Commercial General Liability policy, minimum acceptable limits will be Two Million Dollars (\$2,000,000) aggregate.

Special Arrangements:

A Certificate of Insurance shall be submitted as evidence of the required coverage listing Lee County Board of County Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an additional insured.

Subject to proof of insurance.

Print Name:	Mlke Figueroa	
Signature:	2	
Title:	Błśk Program Manager	
Date:	April 18, 2016	

BOCAG-3

OP ID: KT

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/18/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES

BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT NAME: PHONE (A/C. No. Ext); E-MAIL ADDRESS: PRODUCER TALIANO INSURANCE-BOCA P. O. Box 1406 Boca Grande, FL 33921 Italiano insurance Services in NAIC # INSURER(S) AFFORDING COVERAGE INSURER A : Burlington ins. Co. INSURED **Boca Grande Chamber Commerce** INSURER 8 : P O Box 704 INSURER C Boca Grande, FL 33921 INSURER D : INSURER E INSURER F : REVISION NUMBER: COVERAGES CERTIFICATE NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR POLICY BFF POLICY EXP LIMITS TYPE OF INSURANCE POLICY NUMBER 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Eg occurrence) **GENERAL LIABILITY** 100,000 05/06/2016 | 05/06/2017 6278006700 COMMERCIAL GENERAL LIABILITY 5,000 CLAIMS-MADE X OCCUR MED EXP (Any one person) 1,000,000 PERSONAL & ADVINJURY 2,000,000 GENERAL AGGREGATE X Ilquor \$2m/\$1m 2,000,000 PRODUCTS - COMP/OP AGG GEN'L AGGREGATE LIMIT APPLIES PER: 1.000.000 HostLiq COMBINED SINGLE LIMIT (Ea accident) POLICY PRO-AUTOMOBILE LIABILITY BODILY INJURY (Per parson) ANY AUTO BODILY INJURY (Per accident) 3 ALL OWNED AUTOS SCHEDULED AUTOS NON-OWNED AUTOS PROPERTY DAMAGE (PER ACCIDENT) HIRED AUTOS \$ EACH OCCURRENCE \$ UMBRELLALIAB OCCUR AGGREGATE EXCESS LIAB CLAIMS-MADE DED RETENTIONS WORKERS COMPENSATION WCSTATU-WORKERS COMPENSATION
AND EMPLOYERS' LIABILITY
ANY PROPRIETOR PARTNER EXECUTIVE
OFFICER MEMBER EXCLUDED?
(Mandatory in NH)
If yes, describs under
DESCRIPTION OF OPERATIONS below E.L. EACH ACCIDENT N/A E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT | \$ DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Lee County Board of County Commissioners, a political subdivision & Charter County of the State of FL are Additional Insd on the Gen Liab as required by written contract For events 5/6/15-Ladies Day Capt Party, and 5/20/16 & 5/21/16 for Festival (which is only event to include liquor liability) Other events include host liquor. CANCELLATION CERTIFICATE HOLDER SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Lee County Board of County Commissioners P O Box 398 AUTHORIZED REPRESENTATIVE Fort Myers, FL 33902

@ 1988-2010 ACORD CORPORATION. All rights reserved.

.

Mike Scott Office of the Sheriff



State of Florida County of Lee

Extra Duty Detail Request Form

Please fill out the Extra Duty Request form attached to this document completely. All details are a minimum of four (4) hours with the exception of boat details which are a minimum of six (6) hours and a half hour drive time to and from the detail location. When five (5) or more deputies are assigned to an event, a supervisor with the rank of Sergeant or above will be assigned at an upgraded hourly charge. Depending on the type of event or crowd size, it will be at the discretion of the Sheriff's Office to determine the number of deputies needed.

The current detail rat	es are:		
Security	\$40/hr	Traffic	\$50/hr
Funeral Escort	\$40/hr	Security Supervisor	\$50/hr
Escort	\$40/hr	Traffic Supervisor	\$60/hr
Boat	\$40/hr	Civil Stand-by	\$60/hr
Holiday/Last Minute	\$60/hr	Prisoner Transport	\$60/hr

Details are charged a \$15 per deputy vehicle rate. All boat details are charged a \$20 per hour boat rate.

Extra Duty Details will not be provided to any person, firm or organization whose members, business or operations are of questionable nature; or for any event that will discredit the assigned Deputy, Sheriff's Office or County. The Sheriff's Office reserves the right to cancel the detail without notice and to recall the deputy(s) when necessary for community safety.

The Lee County Sheriff's Office will be the only armed personnel at any event where the detail is taking place. Any private security company that is hired to work alongside the Sheriff's Office will be a reputable, licensed and insured company whose employees are State D licensed <u>unarmed</u> security guards. Proof of the signed contract with private security company will be required.

In order to cancel a detail, notice must be given to the Detail Coordinator twenty-four (24) hours prior to the start of the detail either by phone or email. If the cancellation is less than twenty-four (24) hours, a four (4) hour charge per deputy will be billed. In the case of weather, notice of cancellation must be received within two (2) hours of the starting time otherwise a two (2) hour charge per deputy will be billed. In the event of a cancellation after business hours, please call 239-477-1000 and ask to have the on-call Detail Coordinator call you.

Unless otherwise specified, full payment of all details must be received one (1) week prior to the start of the event in the form of a cashier's check, money order, business check or cash. The Lee County Sheriff's Office does not accept credit cards or personal checks. Payments can be sent to: The Lee County Sheriff's Office 14750 Six Mile Cypress Pkwy., Fort Myers, FL 33912 ATTN: Details Unit.

LEE COUNTY SHE	RIFF'S OFFICE USE ONLY
Total Deputy(s) 2 Total Hours 32	Rate per Hour \$50 Vehicle Rate Waived
	Rate per nour venicle Rate
Total Cost for Detail \$1,280 \$1,600	1 .
Total Cost for Detail	1.151.
1 hd ton	4/18/17
Vender Signature	Date



14750 Six Mile Cypress Parkway • Fort Myers, Florida 33912-4406 • (239) 477-1000

Page 1 of 2

LCSO Form 389 (revised 5/1/2015 B,Martin 07-252)

Vendor Information
Business Name: Boca Grande Chamber of Commerce
Street: P.O.Box 704
City: Boca Grande State: FL Zip Code: 33921
Business Contact: Nat Italiano Phone: 941-964-0568
Email Address: info@bocagrandechamber.com or nat@italianoinsurance.com
Exent Information
Detail Location: Park Ave between 5th & 3rd Street, Downtown Boca Grande
Street:
City: Boca Grande State: FL Zip Code: 33921
Contact During Event: Nat Italiano Phone: 941-964-0400
Event Date: 5/20 & 5/21/16 Event Time: see below
Anticipated Crowd Size: 700-900 Type of Event: Tarpon Tournament Festival
Additional Security Working Detail: Yes V No If Yes, how many?
Permits Attached: Yes No Alcohol Served: Yes No
Detail information
Security Traffic X Prisoner Transport
Escort Holiday Funeral Escort
Last Minute Stand-by
Marked Vchicle Yes No Unmarked Vehicle Yes No
Uniformed Deputy Yes No Plain Clothes Deputy Yes No
Detail Description: Security and presence during event Friday, May 20th & Saturday, May 21st -One (1) Deputy from 1400-2300hrs and an additional one (1) deputy from 1600-2300hrs.

